| B1 (Official Form 1)(04/13)   |  |   |  |                                 |  |                    |   |                     |
|---|--|---|--|---------------------------------|--|--------------------|---|---------------------|
|   | States Bank<br>iddle District o  |   | Court  |                                 |  |                    | Voluntary   | Petition            |
| Name of Debtor (if individual, enter Last, First, Hazen, Randy  | Middle):   |   | Name   | of Joint De                     | ebtor (Spouse)   | ) (Last, First,    | Middle):  |                     |
| All Other Names used by the Debtor in the last (include married, maiden, and trade names):  | ·  |   |  |                                 | used by the J<br>maiden, and                           |                    | in the last 8 years   |                     |
| AKA Randy J. Hazen; AKA Randy J   | James Hazen  |   |  |                                 |  |                    |   |                     |
| Last four digits of Soc. Sec. or Individual-Taxpa (if more than one, state all)  xxx-xx-0362  | yer I.D. (ITIN)/Com  | nplete EIN  |  | our digits o<br>than one, state |  | Individual-T       | Γaxpayer I.D. (ITIN) N  | o./Complete EIN     |
| Street Address of Debtor (No. and Street, City, a 4529 Dalmahoy Court, Unit 102 Fort Myers, FL  | and State):  |   | Street   | Address of                      | Joint Debtor   | (No. and Str       | eet, City, and State):  |                     |
| , , ,   | Г  | ZIP Code <b>33916</b>                                     | _  |                                 |  |                    |   | ZIP Code            |
| County of Residence or of the Principal Place of <b>Lee</b>   |  |   | Count  | y of Reside                     | ence or of the   | Principal Pla      | ace of Business:  |                     |
| Mailing Address of Debtor (if different from stre   | eet address):  |   | Mailir   | ng Address                      | of Joint Debt  | or (if differer    | nt from street address):  |                     |
|   | Г  | ZIP Code  | 4  |                                 |  |                    |   | ZIP Code            |
| Location of Principal Assets of Business Debtor (if different from street address above):   |  |   | •  |                                 |  |                    |   | •                   |
| Type of Debtor  |  | of Business   |  |                                 |  |                    | tcy Code Under Whi  | ch                  |
| (Form of Organization) (Check one box)  ■ Individual (includes Joint Debtors)  See Exhibit D on page 2 of this form.  □ Corporation (includes LLC and LLP)  □ Partnership  □ Other (If debtor is not one of the above entities, check this box and state type of entity below.) | ☐ Health Care Bu☐ Single Asset R☐ in 11 U.S.C. §☐ Railroad☐ Stockbroker☐ Commodity Bu☐ Clearing Bank | eal Estate as d<br>101 (51B)                              | efined   | Chapt Chapt Chapt Chapt Chapt   | er 7<br>er 9<br>er 11<br>er 12                         | ☐ Ch<br>of<br>☐ Ch | led (Check one box)  napter 15 Petition for R a Foreign Main Procee napter 15 Petition for R a Foreign Nonmain Pr | eding<br>ecognition |
| Chapter 15 Debtors  | Other Tay-Fy   | empt Entity   |  |                                 |  |                    | e of Debts  |                     |
| Country of debtor's center of main interests:  Each country in which a foreign proceeding by, regarding, or against debtor is pending:  |  | x, if applicable)<br>xempt organizate<br>the United State | Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as business debts.  "incurred by an individual primarily for |                                 |  |                    |   |                     |
| Filing Fee (Check one box  ■ Full Filing Fee attached  □ Filing Fee to be paid in installments (applicable to   | individuals only). Mus   | ☐ Del   | btor is a sr   |                                 | debtor as defin  |                    |   |                     |
| attach signed application for the court's considerati<br>debtor is unable to pay fee except in installments. I<br>Form 3A.  |  | are   |  | \$2,490,925 (                   |  |                    | luding debts owed to insic<br>on 4/01/16 and every thre   |                     |
| ☐ Filing Fee waiver requested (applicable to chapter attach signed application for the court's consideration  |  | ust   | olan is bein<br>ceptances  | ng filed with<br>of the plan w  | this petition.<br>vere solicited pr<br>S.C. § 1126(b). | epetition from     | one or more classes of cre  | editors,            |
| Statistical/Administrative Information  Debtor estimates that funds will be available   | for distribution to u  | nsecured cred   | itors.   |                                 |  | THIS               | SPACE IS FOR COURT  | USE ONLY            |
| Debtor estimates that, after any exempt prop there will be no funds available for distributi  | erty is excluded and   | administrative  |  | es paid,                        |  |                    |   |                     |
| 1- 50- 100- 200-  | 1,000-<br>5,000 10,000   |   | 3<br>5,001-<br>60,000  | 50,001-<br>100,000              | OVER 100,000   |                    |   |                     |
| Estimated Assets  | \$1,000,001 \$10,000,001 to \$10 to \$50 million million   | \$50,000,001 \$ to \$100 to                               |  |                                 | More than  |                    |   |                     |
| \$0 to \$50,001 to \$100,001 to \$500,001   | \$1,000,001 \$10,000,001 to \$10 to \$50   |   | 100,000,001<br>0 \$500   | \$500,000,001 to \$1 billion    |  |                    |   |                     |

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| B1 (Official For  | m 1)(04/13)   |  | Page 2   |  |
|---|---|--|--|--|
| Voluntar  | Voluntary Petition  Name of Debtor(s): Hazen, Randy   |  |  |  |
| (This page mu   | ust be completed and filed in every case)   | Hazen, Kanuy   |  |  |
| (This page mil  | All Prior Bankruptcy Cases Filed Within Last  | t 8 Years (If more than two                                    | attach additional sheet)   |  |
| Location<br>Where Filed:  |   | Case Number: Date Filed:                                       |  |  |
| Location<br>Where Filed:  |   | Case Number:   | Date Filed:  |  |
|   | ending Bankruptcy Case Filed by any Spouse, Partner, or   | Affiliate of this Debtor (If                                   | more than one, attach additional sheet)  |  |
|   | Name of Debtor: Case Number: Date Filed:  |  |  |  |
| District:   |   | Relationship:  | Judge:   |  |
|   | Exhibit A   |  | Exhibit B  |  |
| (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)  (To be completed if debtor is an individual whose debts are primarily consum I, the attorney for the petitioner named in the foregoing petition, decl have informed the petitioner that [he or she] may proceed under chapter 12, or 13 of title 11, United States Code, and have explained the relie under each such chapter. I further certify that I delivered to the debto required by 11 U.S.C. §342(b). |   |  | oner named in the foregoing petition, declare that I er that [he or she] may proceed under chapter 7, 11, d States Code, and have explained the relief available further certify that I delivered to the debtor the notice 2(b). |  |
| □ Exhibit   | A is attached and made a part of this petition.   | X /s/ David Lampley Signature of Attorney for David Lampley, E | or Debtor(s) (Date)  |  |
|   | Exh   | nibit C  |  |  |
|   | or own or have possession of any property that poses or is alleged to Exhibit C is attached and made a part of this petition.   | pose a threat of imminent and                                  | identifiable harm to public health or safety?  |  |
| Exhibit  If this is a join  | eleted by every individual debtor. If a joint petition is filed, ea D completed and signed by the debtor is attached and made   | a part of this petition.                                       |  |  |
|   | Information Regardin  | ng the Debtor - Venue  |  |  |
|   | (Check any ap   | =  |  |  |
|   | Debtor has been domiciled or has had a residence, principal days immediately preceding the date of this petition or for   |  |  |  |
|   | There is a bankruptcy case concerning debtor's affiliate, ge  | eneral partner, or partnership                                 | p pending in this District.  |  |
|   | Debtor is a debtor in a foreign proceeding and has its princ<br>this District, or has no principal place of business or assets<br>proceeding [in a federal or state court] in this District, or the<br>sought in this District. | s in the United States but is                                  | a defendant in an action or  |  |
|   | Certification by a Debtor Who Reside<br>(Check all app  |  | al Property  |  |
|   | Landlord has a judgment against the debtor for possession   | of debtor's residence. (If bo                                  | x checked, complete the following.)  |  |
|   | (Name of landlord that obtained judgment)   |  |  |  |
|   |   |  |  |  |
|   |   |  |  |  |
|   | (Address of landlord)   |  |  |  |
|   | Debtor claims that under applicable nonbankruptcy law, the entire monetary default that gave rise to the judgment for   |  |  |  |
|   | Debtor has included with this petition the deposit with the after the filing of the petition.   | court of any rent that would                                   | d become due during the 30-day period  |  |
|   | Debtor certifies that he/she has served the Landlord with the   | his certification. (11 U.S.C.                                  | § 362(l)).   |  |

B1 (Official Form 1)(04/13) Page 3

# **Voluntary Petition**

(This page must be completed and filed in every case)

# Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

# X /s/ Randy Hazen

Signature of Debtor Randy Hazen

X

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

July 26, 2013

Date

#### Signature of Attorney\*

## X /s/ David Lampley, Esq.

Signature of Attorney for Debtor(s)

#### David Lampley, Esq. 0044408

Printed Name of Attorney for Debtor(s)

#### The Dellutri Law Group, P.A.

Firm Name

1436 Royal Palm Square Blvd. Fort Myers, FL 33919-1049

Address

### (239) 939-0900 Fax: (239) 939-0588

Telephone Number

July 26, 2013

Date

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

## $Signature\ of\ Debtor\ (Corporation/Partnership)$

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Name of Debtor(s):

Hazen, Randy

### Signatures

#### Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

| ٦ | V |
|---|---|
| 1 | • |

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

## Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

| _ | - |
|---|---|
| v |   |
|   |   |

Date

Address

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

B 1D (Official Form 1, Exhibit D) (12/09)

# United States Bankruptcy Court Middle District of Florida

| In re | Randy Hazen |           | Case No. |   |
|-------|-------------|-----------|----------|---|
|       |             | Debtor(s) | Chapter  | 7 |

# EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.]

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]

| B 1D (Official Form 1, Exhibit D) (12/09) - Cont.   | Page 2   |
|---|--|
| mental deficiency so as to be incapable of realizi financial responsibilities.);  □ Disability. (Defined in 11 U.S.C. § 109 | 9(h)(4) as physically impaired to the extent of being credit counseling briefing in person, by telephone, or |
| ☐ 5. The United States trustee or bankruptcy adrrequirement of 11 U.S.C. § 109(h) does not apply in this                    | ninistrator has determined that the credit counseling s district.  |
| I certify under penalty of perjury that the infe  | ormation provided above is true and correct.   |
|   | Randy Hazen  |
| Date: July 26, 2013   |  |

B6 Summary (Official Form 6 - Summary) (12/07)

# United States Bankruptcy Court Middle District of Florida

| In re | Randy Hazen |        | Case No. |   |
|-------|-------------|--------|----------|---|
| _     | <u> </u>    | Debtor | ,        |   |
|       |             |        | Chapter  | 7 |

# SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE   | ATTACHED<br>(YES/NO) | NO. OF<br>SHEETS | ASSETS            | LIABILITIES | OTHER    |
|--|----------------------|------------------|-------------------|-------------|----------|
| A - Real Property  | Yes                  | 1                | 0.00              |             |          |
| B - Personal Property  | Yes                  | 4                | 12,775.71         |             |          |
| C - Property Claimed as Exempt   | Yes                  | 1                |                   |             |          |
| D - Creditors Holding Secured Claims   | Yes                  | 1                |                   | 1,725.00    |          |
| E - Creditors Holding Unsecured<br>Priority Claims (Total of Claims on Schedule E) | Yes                  | 1                |                   | 0.00        |          |
| F - Creditors Holding Unsecured<br>Nonpriority Claims                              | Yes                  | 5                |                   | 287,186.76  |          |
| G - Executory Contracts and<br>Unexpired Leases                                    | Yes                  | 1                |                   |             |          |
| H - Codebtors  | Yes                  | 1                |                   |             |          |
| I - Current Income of Individual<br>Debtor(s)                                      | Yes                  | 1                |                   |             | 3,043.45 |
| J - Current Expenditures of Individual<br>Debtor(s)                                | Yes                  | 1                |                   |             | 3,032.08 |
| Total Number of Sheets of ALL Schedu   | ıles                 | 17               |                   |             |          |
|  | T                    | otal Assets      | 12,775.71         |             |          |
|  |                      |                  | Total Liabilities | 288,911.76  |          |

Form 6 - Statistical Summary (12/07)

# United States Bankruptcy Court Middle District of Florida

| In re | Randy Hazen |          | Case No. |   |  |
|-------|-------------|----------|----------|---|--|
| -     | -           | Debtor , |          |   |  |
|       |             |          | Chapter  | 7 |  |

# STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

| Type of Liability   | Amount    |
|---|-----------|
| Domestic Support Obligations (from Schedule E)  | 0.00      |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)  | 0.00      |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed) | 0.00      |
| Student Loan Obligations (from Schedule F)  | 30,882.71 |
| Domestic Support, Separation Agreement, and Divorce Decree<br>Obligations Not Reported on Schedule E                | 0.00      |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)                           | 0.00      |
| TOTAL   | 30,882.71 |

#### State the following:

| Average Income (from Schedule I, Line 16)  | 3,043.45 |
|--|----------|
| Average Expenses (from Schedule J, Line 18)  | 3,032.08 |
| Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20) | 4,995.66 |

#### State the following:

|  |      | _          |
|--|------|------------|
| Total from Schedule D, "UNSECURED PORTION, IF ANY"     column              |      | 0.00       |
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column             | 0.00 |            |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column |      | 0.00       |
| 4. Total from Schedule F   |      | 287,186.76 |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4)               |      | 287,186.76 |

## Case 9:13-bk-09839-FMD Doc 1 Filed 07/26/13 Page 8 of 47

B6A (Official Form 6A) (12/07)

.

In re Randy Hazen Case No. \_\_\_\_\_\_\_

Debtor

## **SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property

Nature of Debtor's Interest in Property

Nature of Debtor's Interest in Property

Nature of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption

Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption

None

Sub-Total > **0.00** (Total of this page)

Total > **0.00** 

(Report also on Summary of Schedules)

**0** continuation sheets attached to the Schedule of Real Property

B6B (Official Form 6B) (12/07)

| In re | Randy Hazen | Case No. | _ |
|-------|-------------|----------|---|
| _     |             | Debtor   |   |

# SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

|    | Type of Property  | N O Description and Location of Property E   | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in Property,<br>without Deducting any<br>Secured Claim or Exemption |
|----|---|--|---|---|
| 1. | Cash on hand  | Cash and coins   | -   | 0.00  |
| 2. | Checking, savings or other financial  | Bank of America checking acct. 2800  | J   | 1,100.00  |
|    | accounts, certificates of deposit, or<br>shares in banks, savings and loan,<br>thrift, building and loan, and<br>homestead associations, or credit<br>unions, brokerage houses, or<br>cooperatives. | Bank of America checking acct. 5629  | J   | 15.38   |
| 3. | Security deposits with public utilities, telephone companies, landlords, and others.  | security deposit for 4529 Dalmahoy Court, Unit 102<br>Fort Myers FL  | , J   | 650.00  |
| 4. | Household goods and furnishings, including audio, video, and computer equipment.  | barbecue grill, vacuum, toaster, blender, crock pot, coffee maker, iron, television, stereo system, radio/MP3 player, breakfast table & chairs, kitchen table & chairs, computer, printer, cooking ware, dinnerware/dishes, glassware/cups, flatware, pots/pans, utensils, knives, dining table & chairs, television cart/stand, bed frame, box springs, mattress, night stand, dresser, day bed, night stand, dresser, laundry basket, ironing board, broom/mop/bucket, luggage, bed spreads, comforters/blankets, sheets/pillowcases, pillows, towels/wash cloths, bath/shower acessories, hand tools, power tools | -   | 1,960.00  |
| 5. | Books, pictures and other art<br>objects, antiques, stamp, coin,<br>record, tape, compact disc, and<br>other collections or collectibles.   | X  |   |   |
| 6. | Wearing apparel.  | various men's clothing   | -   | 250.00  |
| 7. | Furs and jewelry.   | watch, charm   | -   | 75.00   |
| 8. | Firearms and sports, photographic, and other hobby equipment.   | sports equipment, bicycle, scooter   | -   | 200.00  |
|    |   | (Total   | Sub-Tota of this page)                      | al > 4,250.38   |

3 continuation sheets attached to the Schedule of Personal Property

B6B (Official Form 6B) (12/07) - Cont.

| In re | Randy Hazen      |                  | Cas   | se No                                       |   |
|-------|------------------|------------------|---|---|---|
| •     |                  |                  | Debtor  |   |   |
|       |                  | SCHEDU           | LE B - PERSONAL PROPERTY (Continuation Sheet) | Y   |   |
|       | Type of Property | N<br>O<br>N<br>E | Description and Location of Property          | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in Property,<br>without Deducting any<br>Secured Claim or Exemption |

Interests in insurance policies. X Name insurance company of each policy and itemize surrender or refund value of each. X 10. Annuities. Itemize and name each issuer. 11. Interests in an education IRA as X defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).) T.RowePrice 401k 4,421.33 12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars. X 13. Stock and interests in incorporated and unincorporated businesses. Itemize. 14. Interests in partnerships or joint X ventures. Itemize. 15. Government and corporate bonds X and other negotiable and nonnegotiable instruments. X 16. Accounts receivable. 17. Alimony, maintenance, support, and X property settlements to which the debtor is or may be entitled. Give particulars. 18. Other liquidated debts owed to debtor including tax refunds. Give particulars. 19. Equitable or future interests, life X estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.

Sub-Total > 4,421.33 (Total of this page)

Sheet <u>1</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

| In re | Randy Hazen | Case No. |
|-------|-------------|----------|
| _     |             |          |

Debtor

# SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

|     |   |                  | (Continuation Sheet)                 |   |   |
|-----|---|------------------|--------------------------------------|---|---|
|     | Type of Property  | N<br>O<br>N<br>E | Description and Location of Property | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in Property,<br>without Deducting any<br>Secured Claim or Exemption |
| 20. | Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.  | X                |                                      |   |   |
| 21. | Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.  | X                |                                      |   |   |
| 22. | Patents, copyrights, and other intellectual property. Give particulars.   | X                |                                      |   |   |
| 23. | Licenses, franchises, and other general intangibles. Give particulars.  | X                |                                      |   |   |
| 24. | Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | X                |                                      |   |   |
| 25. | Automobiles, trucks, trailers, and other vehicles and accessories.  | 2005             | Toyota Camry VIN 4T1BE32K65U057017   | -   | 4,094.00  |
| 26. | Boats, motors, and accessories.   | X                |                                      |   |   |
| 27. | Aircraft and accessories.   | X                |                                      |   |   |
| 28. | Office equipment, furnishings, and supplies.  | X                |                                      |   |   |
| 29. | Machinery, fixtures, equipment, and supplies used in business.  | X                |                                      |   |   |
| 30. | Inventory.  | X                |                                      |   |   |
| 31. | Animals.  | dogs             |                                      | -   | 10.00   |
| 32. | Crops - growing or harvested. Give particulars.   | X                |                                      |   |   |
| 33. | Farming equipment and implements.   | X                |                                      |   |   |
|     |   |                  |                                      | 0.1.5                                       | 1. 440400   |
|     |   |                  | (7)                                  | Sub-Tota<br>Fotal of this page)             | al > <b>4,104.00</b>  |

Sheet **2** of **3** continuation sheets attached to the Schedule of Personal Property

# Case 9:13-bk-09839-FMD Doc 1 Filed 07/26/13 Page 12 of 47

 $B6B\ (Official\ Form\ 6B)\ (12/07)$  - Cont.

| re Randy Hazen   |  | Cas   | se No   |  |
|--|--|---|---|--|
|  |  | Debtor  |   |  |
|  | SC   | HEDULE B - PERSONAL PROPERTY (Continuation Sheet)   | Y   |  |
| Type of Property   | N<br>O<br>N<br>E   | Description and Location of Property  | Husband,<br>Wife,<br>Joint, or<br>Community   | Current Value of<br>Debtor's Interest in Property,<br>without Deducting any<br>Secured Claim or Exemption  |
| Farm supplies, chemicals, and feed.                              | X  |   |   |  |
| Other personal property of any kind not already listed. Itemize. |  | Any and all other unknown assets and causes of action of the Debtor existing at the time of filing.   | -   | 0.00   |
|  | Type of Property  Farm supplies, chemicals, and feed.  Other personal property of any kind | Type of Property  NON NE  Farm supplies, chemicals, and feed.  X  Other personal property of any kind | SCHEDULE B - PERSONAL PROPERTY  (Continuation Sheet)  Type of Property  N O N O N Description and Location of Property E  Farm supplies, chemicals, and feed.  X  Other personal property of any kind  Any and all other unknown assets and causes of | SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)  Type of Property  N O N O N O N O N O N O N E Description and Location of Property  Wife, Joint, or Community  Farm supplies, chemicals, and feed.  X  Other personal property of any kind  Any and all other unknown assets and causes of  - |

Sub-Total > 0.00 (Total of this page) Total > 12,775.71

(Report also on Summary of Schedules)

B6C (Official Form 6C) (4/13)

| In re | Randy Hazen | Case No. |
|-------|-------------|----------|
| _     |             |          |

Debtor

# SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

| Debtor claims the exemptions to which debtor is entitled u (Check one box)  ☐ 11 U.S.C. §522(b)(2)  ☐ 11 U.S.C. §522(b)(3)   | \$155,675. (An   | tor claims a homestead exe<br>nount subject to adjustment on 4/1.<br>th respect to cases commenced on | /16, and every three years thereafter                       |
|--|--|---|---|
| Description of Property  | Specify Law Providing<br>Each Exemption                      | Value of<br>Claimed<br>Exemption  | Current Value of<br>Property Without<br>Deducting Exemption |
| Checking, Savings, or Other Financial Accounts, C  | Certificates of Deposit                                      |   |   |
| Bank of America checking acct. 2800  | Fla. Stat. Ann. § 222.11(2)(b)                               | 1,100.00  | 1,100.00  |
| Bank of America checking acct. 5629  | Fla. Stat. Ann. § 222.25(4)                                  | 15.38   | 15.38   |
| Security Deposits with Utilities, Landlords, and Oth security deposit for 4529 Dalmahoy Court, Unit 102, Fort Myers FL   | <u>ners</u><br>Fla. Stat. Ann. § 222.25(4)                   | 650.00  | 1,300.00  |
| Household Goods and Furnishings barbecue grill, vacuum, toaster, blender, crock pot, coffee maker, iron, television, stereo system, radio/MP3 player, breakfast table & chairs, kitchen table & chairs, computer, printer, cooking ware, dinnerware/dishes, glassware/cups, flatware, pots/pans, utensils, knives, dining table & chairs, television cart/stand, bed frame, box springs, mattress, night stand, dresser, day bed, night stand, dresser, laundry basket, ironing board, broom/mop/bucket, luggage, bed spreads, comforters/blankets, sheets/pillowcases, pillows, towels/wash cloths, bath/shower acessories, hand tools, power tools | Fla. Const. art. X, § 4(a)(2)<br>Fla. Stat. Ann. § 222.25(4) | 1,000.00<br>960.00  | 1,960.00  |
| Wearing Apparel various men's clothing   | Fla. Stat. Ann. § 222.25(4)                                  | 250.00  | 250.00  |
| Furs and Jewelry watch, charm  | Fla. Stat. Ann. § 222.25(4)                                  | 75.00   | 75.00   |
| <u>Firearms and Sports, Photographic and Other Hob</u> sports equipment, bicycle, scooter  | <u>by Equipment</u><br>Fla. Stat. Ann. § 222.25(4)           | 200.00  | 200.00  |
| Interests in IRA, ERISA, Keogh, or Other Pension of T.RowePrice 401k   | or Profit Sharing Plans<br>Fla. Stat. Ann. § 222.21(2)       | 100%  | 4,421.33  |
| <u>Automobiles, Trucks, Trailers, and Other Vehicles</u><br>2005 Toyota Camry VIN 4T1BE32K65U057017  | Fla. Stat. Ann. § 222.25(1)<br>Fla. Stat. Ann. § 222.25(4)   | 1,000.00<br>1,369.00  | 4,094.00  |
| Animals<br>dogs  | Fla. Stat. Ann. § 222.25(4)                                  | 10.00   | 10.00   |

Total: 11,050.71 13,425.71

B6D (Official Form 6D) (12/07)

| In re | Randy Hazen | Case No | _ |
|-------|-------------|---------|---|
| _     |             | Debtor  |   |

## SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | Hu<br>H<br>W<br>J<br>C | sband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED,  NATURE OF LIEN, AND  DESCRIPTION AND VALUE  OF PROPERTY  SUBJECT TO LIEN | CONTINGEN | UNLIQUIDA | DISPUTED | AMOUNT OF<br>CLAIM<br>WITHOUT<br>DEDUCTING<br>VALUE OF<br>COLLATERAL | UNSECURED<br>PORTION, IF<br>ANY |
|--|----------|------------------------|--|-----------|-----------|----------|--|---------------------------------|
| Account No. xxxxxxxxxxx4552  |          |                        | Opened 6/24/07 Last Active 6/07/13   | Т         | D A T E D |          |  |                                 |
| World Omni<br>Po Box 91614<br>Mobile, AL 36691   |          | -                      | 2005 Toyota Camry VIN<br>4T1BE32K65U057017   |           | D         |          |  |                                 |
|  |          |                        | Value \$ 4,094.00  | 1         |           |          | 1,725.00   | 0.00                            |
| Account No.  |          |                        | ,  | T         |           |          | ·  |                                 |
|  |          |                        |  |           |           |          |  |                                 |
|  |          |                        |  |           |           |          |  |                                 |
|  |          |                        |  |           |           |          |  |                                 |
|  |          |                        |  |           |           |          |  |                                 |
|  |          |                        | Value \$   | 1         |           |          |  |                                 |
| Account No.  | T        |                        |  | T         |           |          |  |                                 |
|  | 1        |                        |  |           |           |          |  |                                 |
|  |          |                        |  |           |           |          |  |                                 |
|  |          |                        |  |           |           |          |  |                                 |
|  |          |                        |  |           |           |          |  |                                 |
|  |          |                        | Value \$   | 1         |           |          |  |                                 |
| Account No.  | Ħ        |                        |  | t         |           | П        |  |                                 |
|  | 1        |                        |  |           |           |          |  |                                 |
|  |          |                        |  |           |           |          |  |                                 |
|  |          |                        |  |           |           |          |  |                                 |
|  |          |                        |  |           |           |          |  |                                 |
|  |          |                        | Value \$   | 1         |           |          |  |                                 |
| continuation sheets attached   |          |                        |  | Subt      |           |          | 1,725.00   | 0.00                            |
|  |          |                        |  | Т         | 'ota      | ıl       | 1,725.00   | 0.00                            |
|  |          |                        | (Report on Summary of S  | ched      | ule       | es)      | 1,1 20.00  | 3.00                            |

B6E (Official Form 6E) (4/13)

| •     |             |         |
|-------|-------------|---------|
| In re | Randy Hazen | Case No |
| -     |             | Debtor  |

### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

| total also on the Statistical Summary of Certain Liabilities and Related Data.  |
|---|
| ■ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.   |
| TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)   |
| ☐ Domestic support obligations  |
| Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relation of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).   |
| ☐ Extensions of credit in an involuntary case   |
| Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of trustee or the order for relief. 11 U.S.C. § 507(a)(3).   |
| ☐ Wages, salaries, and commissions  |
| Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sale representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4). |
| ☐ Contributions to employee benefit plans   |
| Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of busine whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).   |
| ☐ Certain farmers and fishermen   |
| Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).  |
| ☐ Deposits by individuals   |
| Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).  |
| ☐ Taxes and certain other debts owed to governmental units  |
| Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).   |
| ☐ Commitments to maintain the capital of an insured depository institution  |
| Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).  |
| ☐ Claims for death or personal injury while debtor was intoxicated  |
| Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).  |

**0** continuation sheets attached

<sup>\*</sup> Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

B6F (Official Form 6F) (12/07)

| In re | Randy Hazen | Case No |
|-------|-------------|---------|
|       |             | Debtor  |

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

| CREDITOR'S NAME,  | C        | Hu          | sband, Wife, Joint, or Community  | C         | U           | Ţ | ٥Т          |                 |
|---|----------|-------------|---|-----------|-------------|---|-------------|-----------------|
| MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.) | CODEBTOR | C<br>H<br>M | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGEN | I QU        | Į | U<br>T<br>F | AMOUNT OF CLAIM |
| Account No. xxxx -xxxxxxxxxx7799  |          | T           | Last Active 6/01/07   | T         | D<br>A<br>T |   | Ī           |                 |
|   | ı        |             | Checking or Savings / Additional Offers   | L         | E<br>D      |   |             |                 |
| 0sfa-Eds<br>2670 Executive Center Cir W<br>Suite 100                                      |          | -           |   |           |             |   |             |                 |
| Tallahassee, FL 32301   |          |             |   |           |             |   |             | 28,765.00       |
| Account No. 9718  |          |             | collections for Centurylink   | T         |             | T | 7           |                 |
| Afni<br>1310 MLK Drive<br>PO Box 3517<br>Bloomington, IL 61702-3517                       |          | -           |   |           |             |   |             |                 |
| <b>G</b>  |          |             |   |           |             |   |             | 147.46          |
| Account No. xxxxxxxxxxx2364   |          |             | Opened 8/02/04 Last Active 2/05/08<br>09-SC-003722  |           |             |   |             |                 |
| Cap One<br>Po Box 85520<br>Richmond, VA 23285   |          | -           | 00 00 000/22  |           |             |   |             |                 |
|   |          |             |   |           |             |   |             | 6,724.00        |
| Account No. xxxxxxxxxxxxx9592  Cap One 26525 N Riverwoods Blvd Mettawa, IL 60045          |          | -           | Opened 4/07/10 Last Active 9/01/11<br>Credit Card   |           |             |   |             |                 |
|   |          |             |   |           |             |   |             | 567.00          |
|   |          |             | (Total of   | Subt      |             |   | .)          | 36,203.46       |

| In re | Randy Hazen | Case No. |
|-------|-------------|----------|
| -     |             | Debtor   |

| CREDITOR'S NAME,<br>MAILING ADDRESS                                | COD      | Hu<br>H     | sband, Wife, Joint, or Community  | CON         | UNLI                  | D<br>I<br>S |                 |
|--|----------|-------------|---|-------------|-----------------------|-------------|-----------------|
| INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)   | ODE BTOR | C<br>A<br>M | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | T I N G E N | Q<br>U<br>I           | U<br>T<br>E | AMOUNT OF CLAIM |
| Account No. xxxx9700   |          |             | Opened 4/19/12 Last Active 9/01/11  | T           | D<br>A<br>T<br>E<br>D |             |                 |
| Cavalry Portfolio Serv<br>500 Summit Lake Dr<br>Valhalla, NY 10595 |          | -           | Collection Attorney Hsbc Bank Nevada  |             | D                     |             | -<br>568.00     |
| Account No. xxxxxxxxxxxx6886                                       | ┢        |             | Opened 9/18/07 Last Active 8/01/08  |             | +                     | +           |                 |
|  |          |             | Credit Card   |             |                       |             |                 |
| Chase<br>Po Box 15298  |          | _           |   |             |                       |             |                 |
| Wilmington, DE 19850   |          |             |   |             |                       |             |                 |
|  |          |             |   |             |                       |             |                 |
|  |          |             |   |             | ╽                     |             | 2,418.00        |
| Account No. 7150   |          |             | collections for Chase Manhattan/FL  |             |                       |             |                 |
| Diversified Collection   |          |             | Department of Education   |             |                       |             |                 |
| PO Box 9057  |          | -           |   |             |                       |             |                 |
| Pleasanton, CA 94566-9057  |          |             |   |             |                       |             |                 |
|  |          |             |   |             |                       |             | 30,882.71       |
| Account No.  | l        |             | collections for Directv   |             | +                     |             |                 |
| First National Collection  |          |             |   |             |                       |             |                 |
| 610 Waltham Way  |          | -           |   |             |                       |             |                 |
| Sparks, NV 89434   |          |             |   |             |                       |             |                 |
|  |          |             |   |             |                       |             | 632.43          |
| Account No. xxxxxxxxxxx2889  | $\vdash$ | ╀           | Opened 8/30/09 Last Active 7/04/13  | -           | +                     | $\vdash$    | 032.43          |
| Account No. AAAAAAAAAAAAAAAA                                       | l        |             | Credit Card   |             |                       |             |                 |
| First Premier Bank   |          |             |   |             |                       |             |                 |
| 601 S Minnesota Ave<br>Sioux Falls, SD 57104                       |          | -           |   |             |                       |             |                 |
| Sloux Falls, SD 57 104   |          |             |   |             |                       |             |                 |
|  |          |             |   |             |                       |             | 159.00          |
| Sheet no1 of _4 sheets attached to Schedule of                     | _        | <u> </u>    | ı   | Sub         | tota                  | al          | 24 660 44       |
| Creditors Holding Unsecured Nonpriority Claims                     |          |             | (Total of   | this        | pag                   | ge)         | 34,660.14       |

| In re | Randy Hazen | Case No |
|-------|-------------|---------|
| _     |             | Debtor  |

|  | C               | н                | sband, Wife, Joint, or Community  | С        | U      | D |                 |
|--|-----------------|------------------|---|----------|--------|---|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)            | C O D E B T O R | H<br>W<br>J<br>C | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM<br>IS SUBJECT TO SETOFF, SO STATE. | ONTLNGEN |        |   | AMOUNT OF CLAIM |
| Account No. 2730   |                 |                  | collections for LVNV Funding  | Т        | T<br>E |   |                 |
| Gamache & Myers PC<br>1000 Camera Avenue<br>Suite A<br>Saint Louis, MO 63126                                 |                 | -                |   |          | D      |   | 2,205.49        |
| Account No. xxxxxxxxxxxx0369   | T               | T                | Opened 6/24/09  |          |        |   |                 |
| Ltd Financial Svcs Lp<br>7322 Southwest Fwy Ste 1<br>Houston, TX 77074                                       |                 | -                | Collection Attorney Citibank South Dako   |          |        |   | 853.00          |
| Account No. xxxxxxxxxxxxxxx1105  | ╀               | _                | Opened 12/24/08 Last Active 7/01/08   | +        |        |   |                 |
| Lvnv Funding Llc Po Box 10497 Greenville, SC 29603   |                 | -                | Factoring Company Account Hsbc Bank Nevada N.   |          |        |   | 2,823.00        |
| Account No. xxxx8006   | H               | H                | Opened 8/24/10 Last Active 7/01/10  |          |        |   |                 |
| Merchants Assoc Cool D<br>134 S Tampa St<br>Tampa, FL 33602  |                 | -                | Collection Attorney Lee Memorial Health   |          |        |   | 1,937.00        |
| Account No. xxxx8028   | t               | $\vdash$         | Opened 8/24/10 Last Active 7/01/10  |          |        |   |                 |
| Merchants Assoc Cool D<br>134 S Tampa St<br>Tampa, FL 33602  |                 | -                | Collection Attorney Lee Memorial Health   |          |        |   | 1,444.00        |
| Sheet no. <b>2</b> of <b>4</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | •               | 1                | (Total of   | Sub      |        |   | 9,262.49        |

| In re | Randy Hazen | Case No. |  |
|-------|-------------|----------|--|
|       |             | Debtor   |  |

|  |          |                        |   | -          |              | -        |                         |
|--|----------|------------------------|---|------------|--------------|----------|-------------------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)              | CODEBTOR | Hu<br>H<br>W<br>J<br>C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | ローのPUTED | AMOUNT OF CLAIM         |
| Account No. xxxxxx9806   |          |                        | Opened 8/26/10 Last Active 12/01/07   | T          | E            |          |                         |
| Midland Funding<br>8875 Aero Dr Ste 200<br>San Diego, CA 92123   |          | -                      | Factoring Company Account Bank Of America   |            | D            |          | 3,177.00                |
| Account No. xxxxxxxxxxxx4952   | t        |                        | Opened 11/18/10 Last Active 10/01/09  |            |              |          |                         |
| Orthopedic Center of Florida<br>12670 Creekside Lane<br>Suite 202<br>Fort Myers, FL 33919-3370                 |          | -                      |   |            |              |          | 142.00                  |
| Account No. xxxx6186  Pinnacle Credit Servic 7900 Highway 7 # 100 Saint Louis Park, MN 55426                   |          | _                      | Opened 10/18/12 Last Active 8/01/08 Factoring Company Account Alltel Communication            |            |              |          | 502.00                  |
| Account No. xxx6147  | t        |                        | Opened 1/04/11 Last Active 6/01/10  |            |              |          |                         |
| Professional Adjmnt Co<br>14410 Metropolis Ave<br>Fort Myers, FL 33912   |          | -                      | Collection Attorney Digestive Specialist  |            |              |          | 427.00                  |
| Account No. xxxxxxxxxxxxxxxxxxxxxxxx1215  Sallie Mae 11100 Usa Pkwy Fishers, IN 46037                          |          | _                      | Opened 12/15/04 Last Active 5/01/08<br>Employment   |            |              |          |                         |
| Fishers, IN 4003/  |          |                        |   |            |              |          | Unkwn or Notice<br>Only |
| Sheet no. <b>_3</b> of <b>_4</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims |          |                        | (Total of t   | ubt        |              |          | 4,248.00                |

| In re | Randy Hazen | Case No. |
|-------|-------------|----------|
| -     |             | Debtor   |

|   |          | _           |                                     |           |              | _           |            |
|---|----------|-------------|-------------------------------------|-----------|--------------|-------------|------------|
| CREDITOR'S NAME,  | CC       | Hu          | usband, Wife, Joint, or Community   | C         | U            | D           |            |
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)          | CODEBTOR | C<br>J<br>M | IS SUBJECT TO SETOFF, SO STATE.     | COZHLZGWZ | Q            | U<br>T<br>E |            |
| Account No. xxxxx0523   |          |             | Opened 3/31/06 Last Active 11/01/09 | T         | E            |             |            |
| Suncoast Schools Fcu<br>Po Box 11904<br>Tampa, FL 33680                                   | x        | -           | 10-CA-055227<br>2606 18th Street SW |           | D            |             | 202,163.00 |
| Account No. 4602  | H        | H           |                                     | $\vdash$  | ╁            | t           |            |
| University of Miami<br>Patient Financial Services<br>PO Box 1270<br>Bangor, ME 04402-1270 |          | -           |                                     |           |              |             | 131.69     |
| Account No. 0271  | T        |             |                                     | T         | T            | T           |            |
| University of Miami<br>Patient Financial Services<br>PO Box 1270<br>Bangor, ME 04402-1270 |          | -           |                                     |           |              |             | 41.01      |
| Account No. 8414  |          |             |                                     | _         | ┢            | -           | 41.01      |
| University of Miami Patient Financial Services PO Box 1270 Bangor, ME 04402-1270          |          | -           |                                     |           |              |             | 476.97     |
| Account No.   | H        | H           |                                     | T         | T            | t           |            |
|   |          |             |                                     |           |              |             |            |
| Sheet no. <u>4</u> of <u>4</u> sheets attached to Schedule of                             |          |             |                                     | Sub       |              |             | 202,812.67 |
| Creditors Holding Unsecured Nonpriority Claims  |          |             | (Total of t                         |           | -            |             |            |
|   |          |             | (Report on Summary of So            |           | Γota<br>dule |             | 287,186.76 |

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In re Randy Hazen Case No. \_\_\_\_\_

Debtor

## SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.

Edc/Malt Realty & Deve 6237 Presidential Ct Ste Fort Myers, FL 33919

B6G (Official Form 6G) (12/07)

lessee of 4529 Dalmahoy Court, Unit 102 beginning 06/01/2013 ending 05/31/2014 @ \$1300.00/month acct. 282Y2616901392714996320

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B6H (Official Form 6H) (12/07)

| In re | Randy Hazen | Case No. |
|-------|-------------|----------|
| -     | •           | Debtor   |

## **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

Anny Allen 2608 18th Street SW Lehigh Acres, FL 33976

Maite Fernandez 4529 Dalmahoy Court Unit 102 Fort Myers, FL 33916 Suncoast Schools Fcu Po Box 11904 Tampa, FL 33680

Edc/Malt Realty & Deve 6237 Presidential Ct Ste Fort Myers, FL 33919

| B6I (Off | icial Form 6I) (12/07) |           |          |  |
|----------|------------------------|-----------|----------|--|
| In re    | Randy Hazen            |           | Case No. |  |
|          |                        | Debtor(s) | -        |  |

# SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

|   | ,   | , ,                |          |                |            |
|---|---|--------------------|----------|----------------|------------|
| Debtor's Marital Status:                              | DEPENDENT   | S OF DEBTOR AND SI | POUSE    |                |            |
|   | RELATIONSHIP(S):  | AGE(S):            |          |                |            |
| Divorced  | Son   | 13                 |          |                |            |
| Employment.   | Son   | 6                  | SPOUSE   |                |            |
| Employment: Occupation                                |   |                    | SFOUSE   |                |            |
| *   | account manager   |                    |          |                |            |
| Name of Employer                                      | Coastal Beverage, Ltd.                                    |                    |          |                |            |
| How long employed                                     | 6 years   |                    |          |                |            |
| Address of Employer                                   | 4747 Progress Avenue<br>Naples, FL 34104                  |                    |          |                |            |
|   | ge or projected monthly income at time case filed)        |                    | DEBTOR   |                | SPOUSE     |
|   | y, and commissions (Prorate if not paid monthly)          | \$                 | 4,995.66 | \$             | N/A        |
| 2. Estimate monthly overtime                          |   | \$ _               | 0.00     | \$             | N/A        |
| 3. SUBTOTAL   |   | \$_                | 4,995.66 | \$             | N/A        |
| 4. LESS PAYROLL DEDUCT                                | TIONS   |                    |          |                |            |
| <ol> <li>Payroll taxes and social</li> </ol>          |   | \$                 | 1,009.38 | \$             | N/A        |
| b. Insurance  |   | \$                 | 0.00     | \$             | N/A        |
| c. Union dues   |   | \$                 | 0.00     | \$             | N/A        |
| d. Other (Specify):                                   | 401k  | \$                 | 149.87   | \$             | N/A        |
|   | child support garnishment                                 | \$                 | 792.96   | \$             | N/A        |
| 5. SUBTOTAL OF PAYROLI                                | L DEDUCTIONS  | \$_                | 1,952.21 | \$             | N/A        |
| 6. TOTAL NET MONTHLY T                                | TAKE HOME PAY   | \$_                | 3,043.45 | \$             | N/A        |
| 7. Regular income from operat                         | ion of business or profession or farm (Attach detailed st | atement) \$        | 0.00     | \$             | N/A        |
| 8. Income from real property                          |   | \$                 | 0.00     | \$             | N/A        |
| 9. Interest and dividends                             |   | \$                 | 0.00     | \$             | N/A        |
| 10. Alimony, maintenance or s dependents listed above | support payments payable to the debtor for the debtor's u | se or that of \$   | 0.00     | \$             | N/A        |
| 11. Social security or governm                        |   | ¢                  | 0.00     | \$             | NI/A       |
| (Specify):  |   |                    | 0.00     | \$             | N/A<br>N/A |
| 12. Pension or retirement incom                       | ma  |                    | 0.00     | φ —            | N/A        |
| 13. Other monthly income                              | me  | Ψ                  | 0.00     | Ψ              | IN/A       |
| (Specify):  |   | \$                 | 0.00     | \$             | N/A        |
| (Specify).  |   | \$                 | 0.00     | \$ <del></del> | N/A        |
|   |   |                    | 0.00     | Ψ              | IVA        |
| 14. SUBTOTAL OF LINES 7                               | THROUGH 13  | \$_                | 0.00     | \$             | N/A        |
| 15. AVERAGE MONTHLY II                                | NCOME (Add amounts shown on lines 6 and 14)               | \$_                | 3,043.45 | \$             | N/A        |
| 16. COMBINED AVERAGE I                                | MONTHLY INCOME: (Combine column totals from lin           | ne 15)             | \$       | 3,043.4        | .5         |

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

| B6J (Off | icial Form 6J) (12/07) |           |  |
|----------|------------------------|-----------|--|
| In re    | Randy Hazen            | Case No.  |  |
|          |                        | Debtor(s) |  |

# SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22C.

| case filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show expenses calculated on this form may differ from the deductions from income allowed on Form 2  | •                     | rage monthly |
|---|-----------------------|--------------|
| ☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household expenditures labeled "Spouse."   | . Complete a separate | schedule of  |
| 1. Rent or home mortgage payment (include lot rented for mobile home)   | \$                    | 1,300.00     |
|   |                       |              |
| a. Are real estate taxes included?  b. Is property insurance included?  Yes No _X |                       |              |
| 2. Utilities: a. Electricity and heating fuel   | \$                    | 150.00       |
| b. Water and sewer  | \$                    | 120.00       |
| c. Telephone  | \$                    | 0.00         |
| d. Other  |                       | 0.00         |
| 3. Home maintenance (repairs and upkeep)  | \$                    | 20.00        |
| 4. Food   | \$                    | 450.00       |
| 5. Clothing   | \$                    | 100.00       |
| 6. Laundry and dry cleaning   | \$                    | 20.00        |
| 7. Medical and dental expenses  | \$                    | 0.00         |
| 8. Transportation (not including car payments)  | \$                    | 350.00       |
| 9. Recreation, clubs and entertainment, newspapers, magazines, etc.   | \$                    | 40.00        |
| 10. Charitable contributions  | \$                    | 0.00         |
| 11. Insurance (not deducted from wages or included in home mortgage payments)   | Ф                     | 0.00         |
| a. Homeowner's or renter's  | \$                    | 0.00         |
| b. Life   | \$                    | 0.00         |
| c. Health   | \$                    | 0.00         |
| d. Auto   | \$                    | 70.00        |
| e. Other  | \$                    | 0.00         |
| 12. Taxes (not deducted from wages or included in home mortgage payments)   |                       |              |
| (Specify) Vehicle tags  | \$                    | 7.00         |
| 13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included i plan)   | n the                 |              |
| a. Auto   | \$                    | 405.08       |
| b. Other  | \$                    | 0.00         |
| c. Other  | \$                    | 0.00         |
| 14. Alimony, maintenance, and support paid to others  | \$                    | 0.00         |
| 15. Payments for support of additional dependents not living at your home   | \$                    | 0.00         |
| 16. Regular expenses from operation of business, profession, or farm (attach detailed statement)  | \$                    | 0.00         |
| 17. Other   | \$                    | 0.00         |
| Other   | \$                    | 0.00         |
| 18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedu if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)  |                       | 3,032.08     |
| <ul><li>19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the following the filing of this document:</li><li>20. STATEMENT OF MONTHLY NET INCOME</li></ul>   | e year                |              |
|   | ¢                     | 3,043.45     |
| <ul><li>a. Average monthly income from Line 15 of Schedule I</li><li>b. Average monthly expenses from Line 18 above</li></ul>   | \$<br>*               | 3,032.08     |
| c. Monthly net income (a. minus b.)   | \$ <del></del>        | 11.37        |
|   | Ψ                     |              |

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 $B6\ Declaration\ (Official\ Form\ 6$  - Declaration). (12/07)

# United States Bankruptcy Court Middle District of Florida

| In re | Randy Hazen  |           |                      | Case No. |                   |
|-------|--|-----------|----------------------|----------|-------------------|
|       |  |           | Debtor(s)            | Chapter  | 7                 |
|       |  |           |                      |          |                   |
|       |  |           |                      |          |                   |
|       | <b>DECLARATION C</b>   | ONCERN    | ING DEBTOR'S SC      | HEDUL    | ES                |
|       |  |           |                      |          |                   |
|       | DECLARATION UNDER I  | PENALTY ( | OF PERJURY BY INDIVI | DUAL DEF | BTOR              |
|       |  |           |                      |          |                   |
|       |  |           |                      |          |                   |
|       | I de alore en den er en alter af er einem th   | 4 T l     | . 1 d C              |          | i-time of 10      |
|       | I declare under penalty of perjury the sheets, and that they are true and correct to the |           |                      |          | es, consisting of |
|       | sinesis, and that they are true and correct to a   |           | ,                    |          |                   |
|       |  |           |                      |          |                   |
|       |  |           |                      |          |                   |
| Date  | July 26, 2013  | Signature | /s/ Randy Hazen      |          |                   |
|       |  |           | Randy Hazen Debtor   |          |                   |
|       |  |           | Dentoi               |          |                   |

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

# United States Bankruptcy Court Middle District of Florida

| In re | Randy Hazen |           | Case No. |   |
|-------|-------------|-----------|----------|---|
|       |             | Debtor(s) | Chapter  | 7 |

### STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

#### 1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE **\$53,117.00 2011: wages \$49,947.00 2012: wages** 

\$29,973.94 2013: estimated year to date wages

#### 2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

\$26.00 **2011: taxable interest** 

2

AMOUNT SOURCE

\$1,891.00 2011: 2010 tax refund \$1,444.00 2012: 2011 tax refund \$2,045.00 2013: 2012 tax refund

#### 3. Payments to creditors

# None

#### Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS<br>OF CREDITOR  | DATES OF<br>PAYMENTS | AMOUNT PAID | AMOUNT STILL<br>OWING |
|--|----------------------|-------------|-----------------------|
| Edc/Malt Realty & Deve<br>6237 Presidential Ct Ste<br>Fort Myers, FL 33919 | monthly              | \$2,600.00  | \$0.00                |
| World Omni<br>Po Box 91614<br>Mobile, AL 36691                             | monthly              | \$1,215.24  | \$1,725.00            |

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225\*. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

|                              |           | AMOUNT    |              |
|------------------------------|-----------|-----------|--------------|
|                              | DATES OF  | PAID OR   |              |
|                              | PAYMENTS/ | VALUE OF  | AMOUNT STILL |
| NAME AND ADDRESS OF CREDITOR | TRANSFERS | TRANSFERS | OWING        |

None

c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT STILL OWING

#### 4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT NATURE OF COURT OR AGENCY STATUS OR AND CASE NUMBER PROCEEDING AND LOCATION DISPOSITION

None b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

<sup>\*</sup> Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

3

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

#### 5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER

DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

#### 6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER DESCRIPTION AND VALUE OF

PROPERTY

### 7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

#### 8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

4

#### 9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

The Dellutri Law Group, P.A. 1436 Royal Palm Square Blvd. Fort Myers, FL 33919 DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR 01/2013 AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY

\$1909.00 (attorney's fees, filing fee, credit counseling, credit check, financial management course)

#### 10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST

ER(S) IN PROPERTY

#### 11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

## 12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

#### 13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

### 14. Property held for another person

None List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

#### 15. Prior address of debtor

None П

If the debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

**ADDRESS** 4460 Lagg Avenue NAME USED Randy Hazen DATES OF OCCUPANCY 07/2010-06/2013

Fort Myers FL

Randy Hazen

07/2008-07/2010

4180 Umbria Lane Fort Myers FL

#### 16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

#### 17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DATE OF

**ENVIRONMENTAL** 

NOTICE

LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS

NAME AND ADDRESS OF

DATE OF

**ENVIRONMENTAL** 

GOVERNMENTAL UNIT

NOTICE

I.AW

None

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

| B7 (Official | Form | 7) | (04/ | 13) |
|--------------|------|----|------|-----|
|--------------|------|----|------|-----|

#### 18. Nature, location and name of business

None 

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

rental

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO.

(ITIN)/ COMPLETE EIN

262545076

**ADDRESS** 

4180 Umbria Lane Fort Myers, FL 33916 **BEGINNING AND** 

NATURE OF BUSINESS **ENDING DATES** 

04/2008-09/2010

None b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME

Rentals

**Kids Zone Party** 

**ADDRESS** NAME

#### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

| Date | July 26, 2013 | Signature | /s/ Randy Hazen |
|------|---------------|-----------|-----------------|
|      |               |           | Randy Hazen     |
|      |               |           | Debtor          |

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

B8 (Form 8) (12/08)

# United States Bankruptcy Court Middle District of Florida

|                 |  | Milaale Dist   | rict of Fiorida                               |                            |                                   |
|-----------------|--|--|---|----------------------------|-----------------------------------|
| In re           | Randy Hazen  |  |   | Case No.                   |                                   |
|                 |  | ]  | Debtor(s)                                     | Chapter                    | 7                                 |
| PART            | CHAPTER 7 INI  A - Debts secured by property of property of the estate. Attach ac            | f the estate. (Part A r  |   |                            |                                   |
| Proper          | ty No. 1   | 1 2  | ]   |                            |                                   |
| Credit<br>World | or's Name:<br>Omni   |  | Describe Property S<br>2005 Toyota Camry      |                            |                                   |
| -               | ty will be (check one):<br>Surrendered   | ■ Retained   |   |                            |                                   |
| ■               | ning the property, I intend to (check a Redeem the property Reaffirm the debt Other. Explain |  | oid lien using 11 U.S.C                       | . § 522(f)).               |                                   |
| -               | ty is (check one):<br>Claimed as Exempt  |  | ☐ Not claimed as exe                          | empt                       |                                   |
|                 | <b>B</b> - Personal property subject to unexadditional pages if necessary.)                  | spired leases. (All three  | e columns of Part B mu                        | st be complete             | ed for each unexpired lease.      |
| Proper          | ty No. 1   |  |   |                            |                                   |
|                 | ''s Name:<br>alt Realty & Deve   | Describe Leased Prolessee of 4529 Dalm beginning 06/01/201@ \$1300.00/month acct. 282Y26169013 | nahoy Court, Unit 102<br>13 ending 05/31/2014 | Lease will be U.S.C. § 365 | e Assumed pursuant to 11 5(p)(2): |
|                 | re under penalty of perjury that that the  |  | intention as to any pr                        | operty of my               | estate securing a debt and/or     |
| Date _          | July 26, 2013  | Signature  | /s/ Randy Hazen<br>Randy Hazen                |                            |                                   |

Debtor

# UNITED STATES BANKRUPTCY COURT MIDDLE DISTRICT OF FLORIDA

# NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

# 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

### Chapter 7: Liquidation (\$245 filing fee, \$46 administrative fee, \$15 trustee surcharge: Total Fee \$306)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

# <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$46 administrative fee: Total fee \$281)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over

Page 2

a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

#### Chapter 11: Reorganization (\$1,167 filing fee, \$46 administrative fee: Total fee \$1,213)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$46 administrative fee: Total fee \$246)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

# 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

B 201B (Form 201B) (12/09)

# **United States Bankruptcy Court**

|         | Middl  | e District of Florida                             |                          |                          |
|---------|--|---|--------------------------|--------------------------|
| In re   | Randy Hazen  |   | Case No.                 |                          |
|         |  | Debtor(s)   | Chapter <b>7</b>         |                          |
|         | CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S)<br>UNDER § 342(b) OF THE BANKRUPTCY CODE |   |                          |                          |
| Code.   | Certi I (We), the debtor(s), affirm that I (we) have receive                           | fication of Debtor<br>red and read the attached n | notice, as required by § | 342(b) of the Bankruptcy |
| Randy   | / Hazen  | $\chi$ /s/ Randy Haz                              | zen                      | July 26, 2013            |
| Printed | d Name(s) of Debtor(s)   | Signature of D                                    | Debtor                   | Date                     |
| Case N  | No. (if known)   | X   |                          |                          |
|         | ·  | Signature of Jo                                   | oint Debtor (if any)     | Date                     |

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

# United States Bankruptcy Court Middle District of Florida

|      |                               | Middle District of Florida                             |                    |                       |
|------|-------------------------------|--|--------------------|-----------------------|
| re   | Randy Hazen                   |  | Case No.           |                       |
|      |                               | Debtor(s)  | Chapter            | 7                     |
|      |                               |  |                    |                       |
|      | VE                            | CRIFICATION OF CREDITOR                                | MATRIX             |                       |
| ab   | ove-named Debtor hereby verif | ies that the attached list of creditors is true and co | orrect to the best | of his/her knowledge. |
| ate: | July 26, 2013                 | /s/ Randy Hazen  |                    |                       |
|      |                               | Randy Hazen  |                    |                       |
|      |                               | Signature of Debtor                                    |                    |                       |

Capital One Edc/Malt Realty & Deve 0sfa-Eds PO Box 30285 2670 Executive Center Cir W 6237 Presidential Ct Ste Suite 100 Salt Lake City, UT 84130-0285 Fort Myers, FL 33919 Tallahassee, FL 32301 Afni Cavalry Portfolio Serv Equifax Credit 1310 MLK Drive 500 Summit Lake Dr PO Box 740256 PO Box 3517 Valhalla, NY 10595 Atlanta, GA 30374 Bloomington, IL 61702-3517 Alltel CenturyLink Experian Building 4 Fifth Floor 100 CenturyLink Drive 475 Anton Boulevard Monroe, LA 71201 One Allied Drive Costa Mesa, CA 92626 Little Rock, AR 72202-2099 Anny Allen Chase Financial Corporation 2608 18th Street SW Po Box 15298 PO Box 203500 Lehigh Acres, FL 33976 Wilmington, DE 19850 Austin, TX 78720-3500 Bank Of America ChexSystems First National Collection Consumer Relation Po Box 982235 610 Waltham Way El Paso, TX 79998 7805 Hudson Rd Ste 100 Sparks, NV 89434 Woodbury, MN 55125 BCA Financial Services Citibank Bankruptcy First Premier Bank 18001 Old Cutler Road PO Box 20507 601 S Minnesota Ave Suite 462 Kansas City, MO 64915 Sioux Falls, SD 57104 Miami, FL 33157-6437 Digestive Specialists PA Cap One First Premier Bank Po Box 85520 8380 Riverwalk Park Blvd Bankruptcy Notices Richmond, VA 23285 PO Box 5524 Suite 200 Fort Myers, FL 33919-8758 Sioux Falls, SD 57117 Florida Dept of Education Cap One Directv 26525 N Riverwoods Blvd Bankruptcy Notices PO Box 7109 PO Box 6550 Mettawa, IL 60045 Tallahassee, FL 32314-7019 Greenwood Village, CO 80155-6550

Diversified Collection

Pleasanton, CA 94566-9057

PO Box 9057

Gamache & Myers PC

1000 Camera Avenue

Saint Louis, MO 63126

Suite A

Capio Partners, LLC

Sherman, TX 75090

Suite 150

2222 Texoma Parkway

Hayt & Landau Maite Fernandez Sallie Mae 7765 SW 87th Avenue 4529 Dalmahoy Court 11100 Usa Pkwy Fishers, IN 46037 Suite 101 Unit 102 Fort Myers, FL 33916 Miami, FL 33173 Hsbc Bank Merchants Assoc Cool D Sallie Mae PO Box 9500 Po Box 19360 134 S Tampa St Portland, OR 97280 Tampa, FL 33602 Wilkes Barre, PA 18773 Hsbc Bank Midland Funding Suncoast Schools Fcu Po Box 5253 8875 Aero Dr Ste 200 Po Box 11904 Carol Stream, IL 60197 San Diego, CA 92123 Tampa, FL 33680 Internal Revenue Service Off Of Stu Fin Assista Trans Union Central Insolvency Op 1940 N Monroe St Ste 70 PO Box 2000 PO Box 7346 Tallahassee, FL 32303 Chester, PA 19022-2002 Philadelphia, PA 19101-7346 JP Morgan Chase Legal Dept Orthopedic Center of Florida University of Miami PO Box 9622 12670 Creekside Lane Patient Financial Services Deerfield Beach, FL 33442 Suite 202 PO Box 1270 Fort Myers, FL 33919-3370 Bangor, ME 04402-1270 Lee Memorial Health System Pinnacle Credit Servic US Attorney General 950 Pennsylvania Ave NW PO Box 150107 7900 Highway 7 # 100 Saint Louis Park, MN 55426 Washington, DC 20530 Cape Coral, FL 33915-0107 Lee Memorial Health System Professional Adjmnt Co US Attorney's Office MD Fla 2776 Cleveland Avenue 14410 Metropolis Ave 400 N Tampa St Ste 3200 Fort Myers, FL 33912 Tampa, FL 33602-4798 Fort Myers, FL 33901 Ltd Financial Svcs Lp Richard J. Boudrea & Assoc. World Omni 7322 Southwest Fwy Ste 1 5 Industrial Way Po Box 91614 Houston, TX 77074 Salem, NH 03079 Mobile, AL 36691 Lvnv Funding Llc Robert M Coplen PA World Omni

10225 Ulmerton Road

Suite 5A

Largo, FL 33771

PO Box 9249

Mobile, AL 36691

Po Box 10497

Greenville, SC 29603

# United States Bankruptcy Court Middle District of Florida

| In re        | Randy Hazen  |  | Case No.  |  |    |
|--------------|--|--|---|--|----|
|              |  | Debtor(s)  | Chapter   | 7  |    |
|              | DISCLOSURE OF COMPENSAT  | TION OF ATTORN   | EY FOR DE   | EBTOR(S)                                     |    |
| C            | Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), compensation paid to me within one year before the filing of the rendered on behalf of the debtor(s) in contemplation of or in   | e petition in bankruptcy, or   | agreed to be paid                                       | to me, for services rendered or to           |    |
|              | For legal services, I have agreed to accept  |  | \$  | 1,500.00                                     |    |
|              | Prior to the filing of this statement I have received  |  |   | 1,500.00                                     |    |
|              | Balance Due  |  | \$  | 0.00   |    |
| 2. \$        | 306.00 of the filing fee has been paid.  |  |   |  |    |
| 3. 7         | The source of the compensation paid to me was:   |  |   |  |    |
|              | ■ Debtor □ Other (specify):  |  |   |  |    |
| 4. T         | The source of compensation to be paid to me is:  |  |   |  |    |
|              | ■ Debtor □ Other (specify):  |  |   |  |    |
| 5. l         | I have not agreed to share the above-disclosed compensation  | on with any other person unl   | less they are mem                                       | bers and associates of my law firm           | ı. |
| ļ            | ☐ I have agreed to share the above-disclosed compensation w copy of the agreement, together with a list of the names of  |  |   |  |    |
| <b>6</b> . 1 | In return for the above-disclosed fee, I have agreed to render le  | egal service for all aspects of  | f the bankruptcy of                                     | ease, including:                             |    |
| t<br>c       | <ul> <li>Analysis of the debtor's financial situation, and rendering ac</li> <li>Preparation and filing of any petition, schedules, statement</li> <li>Representation of the debtor at the meeting of creditors and</li> <li>[Other provisions as needed]</li> <li>Negotiations with secured creditors to reduce reaffirmation agreements and applications as</li> </ul> | of affairs and plan which ma<br>confirmation hearing, and a<br>to market value; exem | ay be required;<br>any adjourned hea                    | rings thereof;                               |    |
|              | In addition to the fees and filing fee above, De report (\$35 p/Debtor), credit counseling cours   |  |   |  |    |
| 7. I         | By agreement with the debtor(s), the above-disclosed fee does a Representation of the debtors in any discharge any other contested matter or adversary processes 522(f)(2)(A) for avoidance of liens on househor representation of the debtor(s) in any matter packedules, and statements.   | geability actions, judicia<br>eeding; preparation and<br>old goods; conversion t     | al lien avoidanc<br>d filing of motic<br>o another chap | ons pursuant to 11 USC<br>ter of bankruptcy; | r  |
|              | CEI  | RTIFICATION  |   |  |    |
|              | certify that the foregoing is a complete statement of any agree ankruptcy proceeding.  | ment or arrangement for pa   | yment to me for re                                      | epresentation of the debtor(s) in            |    |
| Dated        | : July 26, 2013  | /s/ David Lampley, E   | Esq.  |  |    |
|              |  | David Lampley, Esq   | .   |  |    |
|              |  | The Dellutri Law Gro   |   |  |    |
|              |  | Fort Myers, FL 3391  | 9-1049  |  |    |
|              |  | (239) 939-0900 Fax   | : (239) 939-058   | 8  |    |

# Case 9:13-bk-09839-FMD Doc 1 Filed 07/26/13 Page 40 of 47

B22A (Official Form 22A) (Chapter 7) (04/13)

| In re        | Randy Hazen |   |
|--------------|-------------|---|
|              | Debtor(s)   | According to the information required to be entered on this statement |
| Case Number: |             | (check one box as directed in Part I, III, or VI of this statement):  |
|              | (If known)  | ☐ The presumption arises.   |
|              |             | ■ The presumption does not arise.                                     |
|              |             | ☐ The presumption is temporarily inapplicable.                        |

# CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION

In addition to Schedules I and J, this statement must be completed by every individual chapter 7 debtor. If none of the exclusions in Part I applies, joint debtors may complete one statement only. If any of the exclusions in Part I applies, joint debtors should complete separate statements if they believe this is required by § 707(b)(2)(C).

|    | Part I. MILITARY AND NON-CONSUMER DEBTORS  |
|----|--|
| 1A | <b>Disabled Veterans.</b> If you are a disabled veteran described in the Declaration in this Part IA, (1) check the box at the beginning of the Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.  |
|    | □ <b>Declaration of Disabled Veteran.</b> By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. §901(1)).   |
| 1B | Non-consumer Debtors. If your debts are not primarily consumer debts, check the box below and complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.  |
|    | ☐ Declaration of non-consumer debts. By checking this box, I declare that my debts are not primarily consumer debts.   |
|    | Reservists and National Guard Members; active duty or homeland defense activity. Members of a reserve component of the Armed Forces and members of the National Guard who were called to active duty (as defined in 10 U.S.C. § 101(d)(1)) after September 11, 2001, for a period of at least 90 days, or who have performed homeland defense activity (as defined in 32 U.S.C. § 901(1)) for a period of at least 90 days, are excluded from all forms of means testing during the time of active duty or homeland defense activity and for 540 days thereafter (the "exclusion period"). If you qualify for this temporary exclusion, (1) check the appropriate boxes and complete any required information in the Declaration of Reservists and National Guard Members below, (2) check the box for "The presumption is temporarily inapplicable" at the top of this statement, and (3) complete the verification in Part VIII. During your exclusion period you are not required to complete the balance of this form, but you must complete the form no later than 14 days after the date on which your exclusion period ends, unless the time for filing a motion raising the means test presumption expires in your case before your exclusion period ends. |
| 1C | □ <b>Declaration of Reservists and National Guard Members.</b> By checking this box and making the appropriate entries below, I declare that I am eligible for a temporary exclusion from means testing because, as a member of a reserve component of the Armed Forces or the National Guard  |
|    | a. □ I was called to active duty after September 11, 2001, for a period of at least 90 days and □ I remain on active duty /or/ □ I was released from active duty on, which is less than 540 days before this bankruptcy case was filed;  |
|    | OR   |
|    | <ul> <li>b. ☐ I am performing homeland defense activity for a period of at least 90 days /or/</li> <li>☐ I performed homeland defense activity for a period of at least 90 days, terminating on, which is less than 540 days before this bankruptcy case was filed.</li> </ul>   |

|    | Part II. CALCULATION OF M  | 10N   | NTHLY INCO            | ME FOR § 707(b)(            | <b>7</b> ) I                      | EXCLUSION          |                  |            |
|----|--|-------|-----------------------|-----------------------------|-----------------------------------|--------------------|------------------|------------|
|    | Marital/filing status. Check the box that applies  | and c | complete the balance  | e of this part of this stat | emei                              | nt as directed.    |                  |            |
|    | a. Unmarried. Complete only Column A ("Debtor's Income") for Lines 3-11.   |       |                       |                             |                                   |                    |                  |            |
| 2  | b. ☐ Married, not filing jointly, with declaration of separate households. By checking this box, "My spouse and I are legally separated under applicable non-bankruptcy law or my spouse a purpose of evading the requirements of § 707(b)(2)(A) of the Bankruptcy Code." Complete for Lines 3-11. |       |                       |                             |                                   | are living apart o | her tha          | in for the |
|    | c.  Married, not filing jointly, without the decl ("Debtor's Income") and Column B ("Spo   | use's | Income") for Line     | es 3-11.                    | 2.b above. Complete both Column A |                    |                  |            |
|    | d. Married, filing jointly. Complete both Column A ("Debtor's Income") and Column E  |       |                       |                             |                                   | use's Income'')    | for Lin          | es 3-11.   |
|    | All figures must reflect average monthly income received from all sources, derived during the six calendar months prior to filing the bankruptcy case, ending on the last day of the month before  |       |                       |                             |                                   | Column A           | Co               | olumn B    |
|    | the filing. If the amount of monthly income varied   |       |                       |                             |                                   | Debtor's           | $S_{\mathbf{l}}$ | pouse's    |
|    | six-month total by six, and enter the result on the  |       |                       | •                           |                                   | Income             | I                | ncome      |
| 3  | Gross wages, salary, tips, bonuses, overtime, co   | mmi   | ssions.               |                             | \$                                | 4,995.66           | \$               |            |
|    | Income from the operation of a business, profes  |       |                       |                             |                                   |                    |                  |            |
|    | enter the difference in the appropriate column(s) or<br>business, profession or farm, enter aggregate num  |       |                       |                             |                                   |                    |                  |            |
|    | not enter a number less than zero. <b>Do not include</b>   |       |                       |                             |                                   |                    |                  |            |
| 4  | Line b as a deduction in Part V.   |       |                       |                             |                                   |                    |                  |            |
|    |  |       | Debtor                | Spouse                      |                                   |                    |                  |            |
|    | a. Gross receipts  | \$    | 0.00                  |                             | 4                                 |                    |                  |            |
|    | <ul><li>b. Ordinary and necessary business expenses</li><li>c. Business income</li></ul>   | \$    | btract Line b from 1  |                             | \$                                | 0.00               | •                |            |
|    |  |       |                       |                             | Ψ                                 | 0.00               | Ψ                |            |
|    | <b>Rent and other real property income.</b> Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 5. Do not enter a number less than zero. <b>Do not include any</b>   |       |                       |                             |                                   |                    |                  |            |
|    | part of the operating expenses entered on Line b as a deduction in Part V.   |       |                       |                             |                                   |                    |                  |            |
| 5  |  |       | Debtor                | Spouse                      |                                   |                    |                  |            |
|    | a. Gross receipts  | \$    | 0.00                  |                             | 4                                 |                    |                  |            |
|    | <ul><li>b. Ordinary and necessary operating expenses</li><li>c. Rent and other real property income</li></ul>  |       | btract Line b from 1  | ·                           | \$                                | 0.00               | •                |            |
| 6  | Interest, dividends, and royalties.  | Du    | ottact Eme o nom      | Line a                      | \$                                | 0.00               |                  |            |
| 7  | Pension and retirement income.   |       |                       |                             | \$                                | 0.00               |                  |            |
|    | Any amounts paid by another person or entity,  | on o  | rogular basis for     | the household               | Ψ                                 | 0.00               | Ψ                |            |
|    | expenses of the debtor or the debtor's dependen  |       |                       |                             |                                   |                    |                  |            |
| 8  | <b>purpose.</b> Do not include alimony or separate maintenance payments or amounts paid by your  |       |                       |                             |                                   |                    |                  |            |
|    | spouse if Column B is completed. Each regular payment should be reported in only one column; if a payment is listed in Column A, do not report that payment in Column B.   |       |                       |                             |                                   | 0.00               | 2                |            |
|    | Unemployment compensation. Enter the amount  |       |                       |                             | \$                                | 0.00               | Ψ                |            |
|    | However, if you contend that unemployment comp   |       |                       |                             |                                   |                    |                  |            |
| 9  | benefit under the Social Security Act, do not list the amount of such compensation in Column A   |       |                       |                             |                                   |                    |                  |            |
| 7  | or B, but instead state the amount in the space bel  | ow:   |                       |                             | -                                 |                    |                  |            |
|    | Unemployment compensation claimed to be a benefit under the Social Security Act Debte  | or\$  | <b>0.00</b> Spo       | ouse \$                     | \$                                | 0.00               | \$               |            |
|    | Income from all other sources. Specify source ar   | nd an | nount If necessary    | list additional sources     | JΨ                                | 0.00               | Ψ                |            |
|    | on a separate page. <b>Do not include alimony or se</b>  |       |                       |                             |                                   |                    |                  |            |
|    | spouse if Column B is completed, but include al  |       |                       |                             |                                   |                    |                  |            |
|    | maintenance. Do not include any benefits receive received as a victim of a war crime, crime against  |       |                       |                             |                                   |                    |                  |            |
| 10 | domestic terrorism.  | mum   | anity, or as a victim | of international of         |                                   |                    |                  |            |
|    |  |       | Debtor                | Spouse                      |                                   |                    |                  |            |
|    | a.   | \$    |                       | \$                          | 1                                 |                    |                  |            |
|    | b.   | \$    |                       | \$                          | ]                                 |                    |                  |            |
|    | Total and enter on Line 10   |       |                       |                             | \$                                | 0.00               | \$               |            |
| 11 | Subtotal of Current Monthly Income for § 707(<br>Column B is completed, add Lines 3 through 10 in  |       |                       |                             | f<br> \$                          | 4,995.66           | \$               |            |

| 12 | <b>Total Current Monthly Income for § 707(b)(7).</b> If Column B has been completed, add Line Column A to Line 11, Column B, and enter the total. If Column B has not been completed, en the amount from Line 11, Column A.  |                   |    | 4,995.66  |  |  |
|----|--|-------------------|----|-----------|--|--|
|    | Part III. APPLICATION OF § 707(b)(7) EXCLUS  | ON                |    |           |  |  |
| 13 | <b>Annualized Current Monthly Income for § 707(b)(7).</b> Multiply the amount from Line 12 by enter the result.  | the number 12 and | \$ | 59,947.92 |  |  |
| 14 | Applicable median family income. Enter the median family income for the applicable state and household size.  (This information is available by family size at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)  |                   |    |           |  |  |
|    | a. Enter debtor's state of residence: <b>FL</b> b. Enter debtor's household size:  | 3                 | \$ | 54,934.00 |  |  |
| 15 | Application of Section 707(b)(7). Check the applicable box and proceed as directed.  The amount on Line 13 is less than or equal to the amount on Line 14. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete Part VIII; do not complete Parts IV, V, VI or VII.  The amount on Line 13 is more than the amount on Line 14. Complete the remaining parts of this statement. |                   |    |           |  |  |

# Complete Parts IV, V, VI, and VII of this statement only if required. (See Line 15.)

|  | Part IV. CALCULA  | ATION OF CUI  | RREN'             | F MONTHLY INCOM   | ME FOR § 707(b)(                                      | 2) |          |
|--|---|---|-------------------|---|---|----|----------|
| 16   | Enter the amount from Line 12.  |   |                   |   |   | \$ | 4,995.66 |
| Marital adjustment. If you checked the box at Line 2.c, enter on Line 17 the total of any income listed in Line 11, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If you did not check box at Line 2.c, enter zero.    S |   |   |                   |   |   |    |          |
|  | Total and enter on Line 17  |   |                   | Ψ   |   | \$ | 0.00     |
| 18   | Current monthly income for § 70°  | <b>7(b)(2).</b> Subtract Lin  | ne 17 fro         | om Line 16 and enter the res  | ult.  | \$ | 4,995.66 |
|  | Part V. C.  | ALCULATION  | OF D              | EDUCTIONS FROM  | INCOME  |    |          |
|  | Subpart A: Dec  | ductions under St   | andard            | ls of the Internal Revenu   | ue Service (IRS)                                      |    |          |
| National Standards: food, clothing and other items. Enter in Line 19A the "Total" amount from IRS National Standards for Food, Clothing and Other Items for the applicable number of persons. (This information is available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) The applicable number of persons is the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.   |   |   |                   | \$  | 1,234.00  |    |          |
| 19B  | National Standards: health care. Enter in Line al below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) Enter in Line b1 the applicable number of persons who are under 65 years of age, and enter in Line b2 the applicable number of persons who are 65 years of age or older. (The applicable number of persons in each age category is the number in that category that would currently be allowed as exemptions on your federal income tay return, plus the number of any additional dependents whom |   |                   |   |   |    |          |
|  | a1. Allowance per person  |   | a2.               | Allowance per person  | 144   |    |          |
|  | b1. Number of persons<br>c1. Subtotal   | 180.00  | b2.               | Number of persons Subtotal  | 0.00  | \$ | 180.00   |
| 20A  | Local Standards: housing and uti Utilities Standards; non-mortgage e available at www.usdoj.gov/ust/ or the number that would currently be any additional dependents whom ye  | lities; non-mortgage<br>expenses for the applifrom the clerk of the<br>allowed as exemption | e expensicable co | ses. Enter the amount of the punty and family size. (This ptcy court). The applicable f | IRS Housing and information is amily size consists of | \$ | 543.00   |

| 20B | Local Standards: housing and utilities; mortgage/rent expense. En Housing and Utilities Standards; mortgage/rent expense for your coun available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy of the number that would currently be allowed as exemptions on your fear any additional dependents whom you support); enter on Line b the tot debts secured by your home, as stated in Line 42; subtract Line b from not enter an amount less than zero.                 | n is<br>nsists of<br>mber of<br>ts for any |          |          |  |  |
|-----|--|--|----------|----------|--|--|
|     | a. IRS Housing and Utilities Standards; mortgage/rental expense  | \$   | 1,425.00 |          |  |  |
|     | b. Average Monthly Payment for any debts secured by your home, if any, as stated in Line 42  | \$   | 0.00     |          |  |  |
|     | c. Net mortgage/rental expense   | Subtract Line b from Line a.               |          | 1,425.00 |  |  |
| 21  | Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 20A and 20B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below:   |  |          |          |  |  |
|     | I and Standards towns at the model of an artist for the standards  |  |          | 0.00     |  |  |
| 22A | Local Standards: transportation; vehicle operation/public transportation expense.  You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation.  Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 8.  |  |          |          |  |  |
|     | $\square 0  \blacksquare  1  \square  2 \text{ or more.}$  |  |          |          |  |  |
|     | If you checked 0, enter on Line 22A the "Public Transportation" amount from IRS Local Standards: Transportation. If you checked 1 or 2 or more, enter on Line 22A the "Operating Costs" amount from IRS Local Standards: Transportation for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (These amounts are available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)   |  |          |          |  |  |
| 22B | you public transportation expenses, enter on Line 22B the Fublic Transportation amount from IKS Local  |  |          |          |  |  |
|     | Standards: Transportation. (This amount is available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)  |  |          |          |  |  |
|     | Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.)  |  |          |          |  |  |
|     | ■ 1 □ 2 or more.   |  |          |          |  |  |
| 23  | Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation   |  |          |          |  |  |
|     | a. IRS Transportation Standards, Ownership Costs   | \$   | 517.00   |          |  |  |
|     | Average Monthly Payment for any debts secured by Vehicle b. 1, as stated in Line 42  | \$   | 27.01    |          |  |  |
|     | c. Net ownership/lease expense for Vehicle 1   | Subtract Line b from Line a.               | 5        | 489.99   |  |  |
| 24  | Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 23.  Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 42; subtract Line b from Line a and enter |  |          |          |  |  |
|     | the result in Line 24. <b>Do not enter an amount less than zero.</b>   |  |          |          |  |  |
|     | a. IRS Transportation Standards, Ownership Costs  Average Monthly Payment for any debts secured by Vehicle   |  |          |          |  |  |
|     | b. 2, as stated in Line 42   | Subtract Line b from Line a                | 0.00     |          |  |  |
|     | c. Net ownership/lease expense for Vehicle 2   | Subtract Line b from Line a.               |          | 0.00     |  |  |
| 25  | Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes.  |  |          |          |  |  |

| 26 | Other Necessary Expenses: involuntary deductions for deductions that are required for your employment, such as Do not include discretionary amounts, such as voluntary   | s retirement contributions, union dues, and uniform costs.  | \$   | 0.00     |
|----|--|---|------|----------|
| 27 | Other Necessary Expenses: life insurance. Enter total a life insurance for yourself. Do not include premiums for any other form of insurance.  | \$  | 0.00 |          |
| 28 | Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 44.   |   |      |          |
| 29 | Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.  |   |      | 0.00     |
| 30 | Other Necessary Expenses: childcare. Enter the total av childcare - such as baby-sitting, day care, nursery and pres   | \$  | 0.00 |          |
| 31 | Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 19B. Do not include payments for health insurance or health savings accounts listed in Line 34.           |   |      | 0.00     |
| 32 | Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service - such as pagers, call waiting, caller id, special long distance, or internet service - to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted.     |   |      |          |
| 33 | Total Expenses Allowed under IRS Standards. Enter th   | he total of Lines 19 through 32.  | \$   | 5,918.33 |
| 24 | Health Insurance, Disability Insurance, and Health Say the categories set out in lines a-c below that are reasonably dependents.   |   |      |          |
| 34 | a. Health Insurance  | \$ 0.00   |      |          |
|    | b. Disability Insurance  | \$ 0.00   |      |          |
|    |  |   |      |          |
|    | c. Health Savings Account  | \$ 0.00   | \$   | 0.00     |
|    | Total and enter on Line 34.  If you do not actually expend this total amount, state you below:  \$   | \$ 0.00 pur actual total average monthly expenditures in the space  |      | 0.00     |
| 35 | Total and enter on Line 34.  If you do not actually expend this total amount, state you below:   | \$ 0.00  our actual total average monthly expenditures in the space  mily members. Enter the total average actual monthly and necessary care and support of an elderly, chronically   |      | 0.00     |
| 35 | Total and enter on Line 34.  If you do not actually expend this total amount, state you below:  \$  Continued contributions to the care of household or far expenses that you will continue to pay for the reasonable a ill, or disabled member of your household or member of y   | \$ 0.00  our actual total average monthly expenditures in the space mily members. Enter the total average actual monthly and necessary care and support of an elderly, chronically our immediate family who is unable to pay for such ge reasonably necessary monthly expenses that you der the Family Violence Prevention and Services Act or  |      |          |
|    | Total and enter on Line 34.  If you do not actually expend this total amount, state you below:  \$  Continued contributions to the care of household or far expenses that you will continue to pay for the reasonable a ill, or disabled member of your household or member of y expenses.  Protection against family violence. Enter the total average actually incurred to maintain the safety of your family under the contributions. | pur actual total average monthly expenditures in the space mily members. Enter the total average actual monthly and necessary care and support of an elderly, chronically your immediate family who is unable to pay for such ge reasonably necessary monthly expenses that you der the Family Violence Prevention and Services Act or is required to be kept confidential by the court.  Dount, in excess of the allowance specified by IRS Local end for home energy costs. You must provide your case  | \$   | 0.00     |
| 36 | Total and enter on Line 34.  If you do not actually expend this total amount, state you below:  \$   | pour actual total average monthly expenditures in the space of the above the space of the space | \$   | 0.00     |

 $<sup>^{*}</sup>$  Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

| 39 | Additional food and clothing expense expenses exceed the combined allowa Standards, not to exceed 5% of those or from the clerk of the bankruptcy coreasonable and necessary.  | nces for food and clothing (apparel and combined allowances. (This information  | d services) in the IRS<br>on is available at ww   | S National<br>w.usdoj.gov/ust/   | \$       | 0.00       |
|----|--|---|---|--|----------|------------|
| 40 | Continued charitable contributions. Enter the amount that you will continue to contribute in the form of cash of financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2).   |   |   |  |          | 0.00       |
| 41 | Total Additional Expense Deduction   | as under § 707(b). Enter the total of L   | Lines 34 through 40   |  | \$       | 0.00       |
|    | _  | Subpart C: Deductions for De  |   |  | <u> </u> |            |
| 42 | Future payments on secured claims. own, list the name of the creditor, ider check whether the payment includes to scheduled as contractually due to each case, divided by 60. If necessary, list Payments on Line 42.  Name of Creditor                              | For each of your debts that is secured ntify the property securing the debt, states or insurance. The Average Month a Secured Creditor in the 60 months fo                                    | by an interest in protect the Average Mon<br>lly Payment is the to<br>llowing the filing of | thly Payment, and<br>tal of all amounts<br>the bankruptcy<br>Average Monthly |          |            |
|    |  |   |   | t include taxes or insurance?  |          |            |
|    | a. World Omni  | 2005 Toyota Camry VIN   | \$ 27.01  | _  |          |            |
|    | a. World Ollini  | 4T1BE32K65U057017   | Total: Add Lines  |  | \$       | 27.01      |
| 43 | your deduction 1/60th of any amount payments listed in Line 42, in order to sums in default that must be paid in or the following chart. If necessary, list a Name of Creditor  aNONE-  Payments on prepetition priority cla priority tax, child support and alimony | maintain possession of the property. The der to avoid repossession or foreclosus dditional entries on a separate page.  Property Securing the Debt  prims. Enter the total amount, divided by | The cure amount wo re. List and total any 1/60th of t \$                                    | he Cure Amount  Total: Add Lines   | \$       | 0.00       |
|    | not include current obligations, such<br>Chapter 13 administrative expenses<br>chart, multiply the amount in line a by   | as those set out in Line 28.  If you are eligible to file a case under  | chapter 13, complete  | te the following   | \$       | 0.00       |
| 45 | issued by the Executive Office   | strict as determined under schedules e for United States Trustees. (This www.usdoj.gov/ust/ or from the clerk of  | \$ x Total: Multiply Lin  | 10.00 nes a and b  | \$       | 0.00       |
| 46 | <b>Total Deductions for Debt Payment.</b>  | Enter the total of Lines 42 through 45  | 5.  |  | \$       | 27.01      |
|    | •  | ubpart D: Total Deductions f  |   |  | 1        |            |
| 47 | Total of all deductions allowed unde   |   |   |  | \$       | 5,945.34   |
|    |  | ETERMINATION OF § 707(t   |   | PTION  |          | ·          |
| 48 | Enter the amount from Line 18 (Cur   |   |   |  | \$       | 4,995.66   |
| 49 | Enter the amount from Line 47 (Tot   | •   |   |  | \$       | 5,945.34   |
| 50 | Monthly disposable income under §  | 707(b)(2). Subtract Line 49 from Line   | e 48 and enter the res  | sult.  | \$       | -949.68    |
| 51 | 60-month disposable income under § result.   | § 707(b)(2). Multiply the amount in Li  | ne 50 by the number   | 60 and enter the   | \$       | -56,980.80 |

|  | Initial presumption determination. Check the applicable box and proceed as directed.   |   |  |  |  |  |  |
|--|--|---|--|--|--|--|--|
| 52   | ■ The amount on Line 51 is less than \$7,475*. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII. Do not complete the remainder of Part VI.  |   |  |  |  |  |  |
| ☐ The amount set forth on Line 51 is more than \$12,475* Check the box for "The presumption arises" at the top of page 1 of statement, and complete the verification in Part VIII. You may also complete Part VII. Do not complete the remainder of Part V |  |   |  |  |  |  |  |
|  | ☐ The amount on Line 51 is at least \$7,475*, but not more than \$12,475*. Co  | omplete the remainder of Part VI (Lines 53 through 55).     |  |  |  |  |  |
| 53   | Enter the amount of your total non-priority unsecured debt \$  |   |  |  |  |  |  |
| 54   | Threshold debt payment amount. Multiply the amount in Line 53 by the number  | er 0.25 and enter the result. \$                            |  |  |  |  |  |
|  | Secondary presumption determination. Check the applicable box and proceed a  | as directed.  |  |  |  |  |  |
| 55   | ☐ The amount on Line 51 is less than the amount on Line 54. Check the box of this statement, and complete the verification in Part VIII.   | for "The presumption does not arise" at the top of page     |  |  |  |  |  |
|  | ☐ The amount on Line 51 is equal to or greater than the amount on Line 54. of page 1 of this statement, and complete the verification in Part VIII. You may a  |   |  |  |  |  |  |
|  | Part VII. ADDITIONAL EXPENSE   | CLAIMS  |  |  |  |  |  |
| 56   | <b>Other Expenses.</b> List and describe any monthly expenses, not otherwise stated in you and your family and that you contend should be an additional deduction from 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All f each item. Total the expenses. | n your current monthly income under §                       |  |  |  |  |  |
|  | Expense Description  | Monthly Amount  |  |  |  |  |  |
|  | a.   | \$  |  |  |  |  |  |
|  | b.   | \$  |  |  |  |  |  |
|  | c.   | \$  |  |  |  |  |  |
|  | d.   | \$  |  |  |  |  |  |
|  | Total: Add Lines a, b, c, and d  | \$  |  |  |  |  |  |
|  | Part VIII. VERIFICATION  | N   |  |  |  |  |  |
|  | I declare under penalty of perjury that the information provided in this statement   | is true and correct. (If this is a joint case, both debtors |  |  |  |  |  |
| 57   | must sign.)  Date: July 26, 2013 Signatus  | re: /s/ Randy Hazen   |  |  |  |  |  |
| 31   |  | Randy Hazen   |  |  |  |  |  |
|  |  | (Debtor)  |  |  |  |  |  |
|  |  |   |  |  |  |  |  |

<sup>\*</sup> Amounts are subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

# **Current Monthly Income Details for the Debtor**

# **Debtor Income Details:**

Income for the Period 01/01/2013 to 06/30/2013.

# Line 3 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Coastal Beverage

Income by Month:

| 6 Months Ago: | 01/2013            | \$4,005.69 |
|---------------|--------------------|------------|
| 5 Months Ago: | 02/2013            | \$5,045.82 |
| 4 Months Ago: | 03/2013            | \$4,792.69 |
| 3 Months Ago: | 04/2013            | \$4,644.73 |
| 2 Months Ago: | 05/2013            | \$7,257.05 |
| Last Month:   | 06/2013            | \$4,227.96 |
|               | Average per month: | \$4,995.66 |
|               |                    |            |